

No. C 170374	Due no later than Dec 31, 2007 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. VON HEIDEN INSURANCE GROUP, INC. 1010 N COLE RD BOISE ID 83704		DONALD M LIDSTROM 1010 N COLE RD BOISE ID 83704			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	DONALD M LIDSTROM	1010 NORTH COLE ROAD	BOISE	ID	USA	83704
5. Organized Under the Laws of: ID C 170374	6. Annual Report must be signed.* Signature: Cheryl Parker Name (type or print): Cheryl Parker		Date: 12/31/2007 Title: Admin Asst.			
Processed 12/31/2007		* Electronically provided signatures are accepted as original signatures.				